ALABAMA STATE COUNCIL ON THE ARTS FINAL REPORTING FORMS B-2 Folk Art Apprenticeships



Use this form to report final expenditures for Folk Art Apprenticeships

INSTRUCTIONS

The forms in this packet are for use by individuals. Use FINAL REPORT FORM A if you are reporting expenditures for an organization or a school or for project grants, program development grants, general operating support grants, presenting grants or arts in education grants.

Please review the enclosed Grantee Information sheet. This sheet lists the most recent information that we have regarding this grant. Please note any changes or additional information and return this form with your final report. This form also contains information that you may wish to reference while completing your final report.

Print or type the requested information.

REMINDERS

Final reports are due thirty (30) days following the completion of the funded project or activity and no later than September 30. If for any reason you may be filing your report after September 30, you must make advance arrangements with your program manager by September 1. Otherwise, funds may not be available if your final report is received after September 30.

We cannot process additional grants for you if you fail to file a final report and you will be ineligible for future grants until a final report is received.

Final Report Processing
Alabama State Council on the Arts
201 Monroe Street, Suite 110
Montgomery, AL 36130-1800

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ALABAMA STATE COUNCIL ON THE ARTS FINAL REPORTING FORMS B-2 Folk Art Apprenticeships

1.	Name:
2.	Social Security Number:
3.	Grant Award Number:
4.	Program Identification Number:
5.	Grantee Race/Ethnicity: We have been asked to collect the following information and report the data to the National Endowment for the Arts as a part of our final report of federal fund expenditures. The information is for statistical purposes. If you have any questions or wish additional information, please call your program manager.
W	hich of the following most closely identifies your race/ethnicity:
	(N) American Indian/Alaskan Native (A) Asian/Pacific Islander (B) Black, not Hispanic (H) Hispanic (W) White, not Hispanic (M) Multi-Racial (combination of those above if no single race applies) 6. Name of Teacher:
	7. Names of Students:
	8. What art form was taught?
	9. In what community did this activity take place?
	10. Was this a successful learning/teaching experience?

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11. Briefly describe the project application.	et, its successe	s, and note any aspects that differ from the
12. Attach any newspaper art	icles or other ir	nformation about your apprenticeship.
13. Request for payment		
Name:		
Social Security Num	ber:	
Total Grant Award:	\$	
Total Grant Expendi	tures: \$	
Amount Received to	date: \$	
Balance Requested	\$	
		information is true and correct and that pose of the above referenced grant.
Print Name	Signature	Date
		Date Final Report Received Program Manager Review
Places complete the	a duplicato form	Approved for Payment

Please complete the duplicate form (with signatures) immediately following.

Copy 1 (ASCA Grant Files) Copy 2 (State Comptrollers Office for Payment Processing)

Copy 1 (ASCA Grant Files)

12. Attach any	newspaper articles	or other	r information about your apprenticeship.	
13. Request fo	r payment			
Nam	ie:			
Socia	al Security Number:			
Tota	l Grant Award:	\$		
Tota	I Grant Expenditures	s: \$		
Amo	ount Received to date	e: \$		
Bala	nce Requested:	\$		
expenditures w	vere incurred solely		g information is true and correct and that surpose of the above referenced grant. Date	
expenditures w	vere incurred solely	for the pu	urpose of the above referenced grant.	
expenditures w	vere incurred solely	for the pu	urpose of the above referenced grant.	
expenditures w	vere incurred solely	for the pu	Date	
	vere incurred solely	for the pu	Date Final Report Received	

11. Briefly describe the project, its successes, and note any aspects that differ from the

Copy 2 (State Comptrollers Office for Payment Processing)